21 33 43 57

PATENT APPLICATION FEE DETERMINATION RECO								Application of Docket Number					
Effective October 1, 2003								10765744					
CLAIMS AS FILED - PART I								L E	NTITY		OTHER	THAN	
(Column 1) (Column 2)								TYPE			OR SMALL ENTITY		
T	OTAL CLAIMS		210		·		RA	ΤE	FEE	]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			20=		* 70		xs	9=		OR	X\$18=	360	
INE	DEPENDENT C	LAIMS			* /		X4:	3=	·	OR	X86=	81	
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT				+14	5=		OR	+290=	<u> </u>	
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT		<u> </u>	JON OR	TOTAL	1216	
CLAIMS AS AMENDED - PART II									Ļ	<b>J</b> 0	OTHER		
		(Column 1)		(Column 2) (Column 3)			SMA	LL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PRÉVIO PAID F	BER JUSLY	PRESENT EXTRA	RAT	Ē	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##		=	·x\$ 9	)=		OR	X\$18=		
AME	Ind pendent	*	Minus	***		=	X43	=		OR	X86=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145			1 1	+290=		
								TAL		OR	TOTAL		
							ADDIT.			OR	ADDIT. FEE		
	(Column 1)			(Column 2) (Column 3)				- т	4.0.0	1 6			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUMB PREVIO PAID F	USLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=	X43	=	*****	OR	X86=		
	FIRST PRESE	NTATION OF MU	ILTIPLE DEP	PENDENT	CLAIM		+145	寸			.000		
								= TAL		OR	+290= TOTAL	•	
								EE L	· · · · · · · · · · · · · · · · · · ·	OR ,	DDIT. FEE	<del></del>	
		(Column 1) CLAIMS		(Column 3)	٠.								
AMENDMENT C		REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA	RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	##		=	X\$ 9:	-		OR	X\$18=		
	Independent	*	Minus	***		=	X43=	1			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145	╅		OR	<del></del>		
* 16	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290=		
** If the "High st Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
T	he "High st Num	ber Previously Paid	For (Total or	Independen	iess than it) is the	i 3, enter 3. highest number f	ound in the	appr	opriat box	in colu	mn 1.		